

TOWNSHIP OF MARLBORO

ZONING BOARD OF ADJUSTMENT

1979 TOWNSHIP DRIVE

MARLBORO, NJ 07746-2299

PHONE: (732) 536-0200 EXT. 1809 FAX: (732) 617-7225

web: www.marlb主oro-nj.gov e-mail: zoning@marlb主oro-nj.gov

Chairperson

Michael Shapiro

Vice-Chairperson

Matthew Weilheimer

Secretary

Alan Zwerin

Frank Yozzo

Ira Levin

Jennifer Bajar

Ibrahim El-Naboulsi - Alt #1

Stacey DiGrande - Alt #2

Zoning Board Clerk

Yvonne Cautillo

Attorney

Ronald D. Cucchiaro, Esq.

Engineer

Birdsall Engineering
James Priolo, P.E., P.P.

Planner

T & M Associates, LLC
Richard Cramer, P.P.

Traffic Consultant

French & Parrello
Mark Kataryniak, P.E.

Administrative Officer

Zoning Officer

Sarah Paris

APPLICATION FOR HEARING

Application ZB#: _____ (office use only)

Date Received: _____ (office use only)

(*18 COPIES OF PLANS *4 COPIES OF APPLICATION *MAPS MUST BE FOLDED)

1. Please check the appropriate request(s).

☐ Concept Plan

☐ Site Plan

☐ Use Variance

☐ Bulk Variance(s)

☐ Minor Subdivision

☐ Major Subdivision

☐ Interpretation

☐ Appeal of Zoning Officer's Decision

2. APPLICANT'S NAME: _____
(If Corporation, State of Incorporation and Registered Agent)

ADDRESS: _____

PHONE #: _____ TAX I.D. or SS#: _____

3. State Applicant's relationship to Owner: _____

4. Represented by (Attorney): _____

Address: _____

Phone #: _____ Fax#: _____

5. Name of Proposed Development: _____

6. Purpose of this Application: _____

7. If Commercial or Industrial: State the Sq.Ft. of New Building: _____ # of Parking Spaces: _____

8. Use of any existing building on premises: _____

9. # of existing lots: _____ # of proposed new lots: _____

10. Use of the proposed building or premises: ☐ Residential ☐ Commercial ☐ Industrial
☐ Mixed Residential/Commercial ☐ Other: _____

11. Location of premises: _____

12. _____
TAX MAP BLOCK LOT(S) NUMBER(S) TAX SHEET PAGE

13. Area of entire tract: _____

14. If there has been a previous appeal or application involving these premises, give details:

TOWNSHIP OF MARLBORO

Zoning Board of Adjustment

- PETITION ON APPEAL -

ZB#: _____

THE ZONING BOARD OF ADJUSTMENT OF MARLBORO TOWNSHIP:

Petition of _____ Respectfully shows that

- a. _____ Applicant is owner of the property described below
- b. _____ Applicant is _____ and is duly authorized by _____, the owner of said property, to prosecute the within appeal. The affidavit of said owner is attached hereto.

The property affected by this appeal is known as _____

Block _____, Lot(s) _____, as shown on the latest tax map of the

Township. Said property is located in a _____ zone. As designated by

the Zoning Map and Zoning Ordinance of the Township of Marlboro currently in effect.

_____ Applicant applied for a building permit to construct (make alterations to the following building or structure) for the following use: _____

_____ Applicant applied to the Zoning Officer for permission to: _____

The Zoning Officer declined to issue such permit on the _____ day of _____, for the following: _____

Front Yard Setback _____ Rear Yard Setback _____
Side Yard Setback _____ and _____
Height of Building _____ # of Stories _____
Other Information _____

Applicant requested that appropriate relief (variance), (recommendation of variance), (special use permit) be granted for the following: _____

There has been no prior application to this Board for any relief relating to the property affected by this appeal except _____

The following fees are submitted to support this petition:

a. Filing (Application Fee) of \$ _____ b. (Escrow) \$ _____
c. _____ d. _____

Applicant requests that a day be fixed for the holding of a Public Hearing on this Appeal. Applicant shall, in compliance with statutory requirements, cause the required Notices of the Public Hearing to be served upon all owners of property situated within two hundred (200) feet of the above described property affected by this appeal (if property is located within 22 feet of an adjacent municipality or abuts a county road or proposed county road) upon the _____ Monmouth _____ County Zoning Board and Municipality of _____ Marlboro _____ whereof Applicant respectfully states that your Zoning Board, after Public Hearing, grant the relief requested.

DATED: _____

Applicant's Signature

TOWNSHIP OF MARLBORO

Zoning Board of Adjustment

- VARIANCE APPLICATION -

1. Identification of all sections of zoning ordinances from which relief is sought.

2. Statement of reasons why variance(s) is/are needed.

Township of Marlboro

1979 Township Drive

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

WHEREAS, THE APPLICANT, _____
HEREINAFTER REFERRED TO AS THE APPLICANT/DEVELOPER, HAS
FILED AN APPLICATION FOR _____ VARIANCES AND
WAIVER FOR THE CONSTRUCTION OF
_____ LOCATED ON BLOCK
_____ LOT _____ IN THE TOWNSHIP OF MARLBORO,
AND

WHEREAS, THE APPLICANT'S DEVELOPER'S APPLICATION
ZBA _____ FOR SUCH RELIEF WAS GRANTED APPROVAL BY THE
MARLBORO TOWNSHIP ZONING BOARD OF ADJUSTMENT
DATED _____

WHEREAS, THAT RESOLUTION REQUIRED THE APPLICANT/
DEVELOPER TO INDEMNIFY AND HOLD HARMLESS THE TOWNSHIP OF
MARLBORO AND ITS OFFICIALS, EMPLOYEES AND CONSULTANTS.

NOW THEREFORE, IN ACCORDANCE WITH THE PROVISIONS AND
REQUIREMENTS OF SAID RESOLUTION, THE APPLICANT/DEVELOPER,
HEREBY AGREES TO INDEMNIFY AND HOLD HARMLESS THE TOWNSHIP
OF MARLBORO, ITS OFFICIALS, EMPLOYEES AND CONSULTANTS FROM
ANY AND ALL CLAIMS OF DAMAGE SUFFERED OR ALLEGED TO BE
SUFFERED BY ANY PERSON ARISING FROM THE ACTS OF
APPLICANT'S/DEVELOPERS NOTWITHSTANDING THE APPROVAL OF
THE DEVELOPER'S PLANS BY THE TOWNSHIP OR AND OF ITS BOARDS
OR AGENCIES WHETHER SAID DAMAGES ARE SUSTAINED PRIOR TO,
DURING OR AFTER CONSTRUCTION OF APPLICANT'S/DEVELOPERS
PROJECT.

SIGNATURE _____ DATE _____

WITNESS _____

ZONING BOARD OF ADJUSTMENT

TOWNSHIP OF MARLBORO

DISCLOSURE STATEMENT

Application Number ZB _____ Date _____

Applicant Name _____

Received by _____ Date received _____

Disclosure Pursuant to N.J.S.A. 40:55D-48.1

To: The Township of Marlboro Zoning Board of Adjustment

Pursuant to N.J.S.A. 40:55D-48.1 _____
Applicant Name

Is a Corporation or Partnership, which has applied to the Township of Marlboro Zoning Board of Adjustment for permission to subdivide a parcel of land into six or more lots, or is applying for a variance to construct a multiple dwelling of 25 or more family units or for approval of a site to be used for commercial purposes under Zoning Board Application Number _____ and, therefore, discloses the names and addresses of all stockholders or individual partners who own ten percent (10%) or more of it's stock or of ten percent (10%) or greater interest in the partnership as the case may be:

Name of Stockholder of Interest	Address	Percentage
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Applicant Name (Print)

Applicant Signature

OWNERS'S AFFIDAVIT OF AUTHORIZATION AND CONSENT

In the matter of _____ ZB# _____

STATE OF NEW JERSEY

COUNTY OF MONMOUTH SS# _____

_____ of full age, being duly sworn according
to law and oath deposes and says:

I reside at _____

And am the owner in fee of _____

Name of company if applicable

Which company is the owner in fee of property located at _____

Marlboro Township, NJ designated as Block _____ Lot _____

On the latest Tax Map of Marlboro Township

The applicant above named is the (my) _____

Relationship to owner

I (or said company) authorizes said Applicant to appeal to the Zoning Board of Adjustment of Marlboro Township for such relief as the applicant may seek relating to said property and consent(s) to such appeal and agree(s) that any decision of the Zoning Board of Marlboro Township on such appeal be binding upon me (said company) as if said appeal has been brought and prosecuted directly, by me as owner

SUBSCRIBED AND SWORN TO BEFORE ME

THIS _____ DAY OF _____

NOTARY

OWNER'S SIGNATURE

Exhibit No. _____

TOWNSHIP OF MARLBORO

ZONING BOARD OF ADJUSTMENT

**1979 TOWNSHIP DRIVE
MARLBORO, NEW JERSEY 07746**

TAX COLLECTOR'S CERTIFICATION

I, Kelly Hahn Tax Collector for the Township of Marlboro, do hereby certify and affirm that no taxes or assessment for local improvements are due or delinquent on Block _____, Lot(s) _____, as shown on the Tax Map of the Township of Marlboro.

Taxes paid thru _____

Taxes unpaid for _____ **Date**

Name

Signature & Date:

NOTICE OF PUBLIC HEARING TO ADJOINING PROPERTY OWNERS

FILE #ZB _____

IN THE MATTER OF: _____

TO: _____
(OWNER OF ADJOINING PROPERTY)

PLEASE TAKE NOTICE.....

THE UNDERSIGNED HAS APPEALED TO THE ZONING BOARD OF
ADJUSTMENT OF MARLBORO TOWNSHIP FOR A USE VARIANCE,
REQUESTING RELIEF FROM SECTION(S) _____,
AND ANY AND ALL VARIANCES THAT MIGHT BE DEEMED NECESSARY
DURING THE COURSE OF THE HEARING, BY THE ZONING BOARD OF
ADJUSTMENT OF THE TOWNSHIP OF MARLBORO SO AS TO PERMIT THE:

ON PREMISES KNOWN AS _____

BLOCK _____, LOT(S) _____

WHICH IS WITHIN 200 FEET OF PROPERTY OWNED BY YOU. THIS
APPEAL IS NOW ON THE CALENDAR AND A PUBLIC HEARING HAS BEEN
SCHEDULED FOR _____, 2012 AT 8:00 P.M. IN
THE MUNICIPAL BUILDING 1979 TOWNSHIP DRIVE, MARLBORO, NEW
JERSEY AT WHICH TIME YOU MAY APPEAR IN PERSON, OR BY AN
ATTORNEY AND PRESENT ANY OBJECTIONS YOU MAY HAVE TO THE
GRANTING OF THIS APPEAL OR EVIDENCE RELATING THERETO. ALL
PROPOSED EXHIBITS ARE ON FILE WITH THE ZONING BOARD CLERK
AND ARE AVAILABLE FOR INSPECTION AT REGULAR BUSINESS HOURS.

THIS NOTICE IS SERVED UPON YOU BY THE APPLICANT BY DIRECTION
OF THE ZONING BOARD OF ADJUSTMENT PURSUANT TO STATUTE.

APPLICANT'S SIGNATURE

DATE

Township of Marlboro

Michael Imbriaco
Tax Assessor

1979 Township Drive
Marlboro, New Jersey 07746
(732) 536-0200 FAX: (732) 972-7697

REQUEST FOR 200 FT. PROPERTY OWNERS LIST

PROPERTY KNOWN AS BLOCK_____LOT_____

ADDRESS OF PROPERTY_____

REQUIRED FEE \$10.00 PER BLOCK & LOT

SIGNATURE

DATE: _____

TO BE MAILED TO:

NAME _____

ADDRESS _____

TELEPHONE NUMBER _____

**AFFIDAVIT OF SERVICE
ZONING BOARD OF ADJUSTMENT**

In the manner of

Applicant _____

State of New Jersey
County of Monmouth

SS# _____

Name of Party Making Application _____ of
full age, being according to law, deposes and says:

1. I reside at _____
County of _____ and State of New Jersey.
2. I am the applicant, his or her agent or attorney in a proceeding before
the Marlboro Township Board of Adjustment.
3. At least 10 (ten) days prior to the time appointed for hearing I served
notice of this proceeding upon each and all of the owners of property
affected by one of the following methods:
 - A) Certified mail, return receipts attached to this affidavit
 - B) Personally, by handing a copy of the Notice to the owner
4. A true copy of this notice and a list of the names and addresses of all
persons notified indicating the date and manner of services are attached to
this affidavit.

SIGNATURE _____

Sworn and Subscribed by me before this _____ day of _____
2012.

TOWNSHIP OF MARLBORO
Zoning Board of Adjustment

- CONFLICT & CONTRIBUTION DISCLOSURE STATEMENTS -

This form must be completed by all applicants for a variance, waiver or exception in conjunction with any application for a subdivision, not considered a minor subdivision, or a site plan, not considered a minor site plan. All applicants have a continuing obligation while their application is pending before the Zoning Board of Adjustment to amend this form to disclose all contributions and relationships that fall within the scope of the disclosure requirements. The information disclosed on this form shall not be used in any manner as evidence relevant to the decision-making criteria for granting the subject application.

As used in this form, the following terms shall mean:

DEVELOPER: The legal or beneficial owner or owners of a lot or of any land proposed to be included in a proposed development, including the holder of an option or contract to purchase, or other person having an enforceable proprietary interest in such land.

PROFESSIONAL: Any person or entity whose principals are required to be licensed by New Jersey law. Professional shall include both the individuals and, if applicable, the firms or entities in which said individuals practice.

CONTRIBUTION: Every loan, gift, subscription, advance or transfer of money or other thing of value, including any item of real property or personal property, tangible or intangible (but not including services provided without compensation by individuals volunteering a part or all of their time on behalf of a candidate, committee or organization), made to or on behalf of any candidate, candidate committee, joint candidates committee, political committee, continuing political committee or political party committee and any pledge, promise or other commitment or assumption of liability to make such transfer. For purposes of this form, any such commitment or assumption shall be deemed to have been a contribution upon the date when such commitment is made or liability assumed.

1. **CONTRIBUTION DISCLOSURE STATEMENT:** Please list below all contributions to any candidate, candidate committee, joint candidates committee, political committee, continuing political committee or political party committees of, or pertaining to, the Township of Marlboro made within one (1) year prior to the last municipal election through the time of filing the application with or seeking approval from the Zoning Board of Adjustment by (a) the applicant; (b) any developer involved in the application; (c) any associates (stockholders or individual partners) of said developers who are required to be disclosed pursuant to N.J.S.A. 40:55D-48.1 or 40:55D-48.2; and (d) any professionals who apply for or provide testimony, plans or reports in support of the application or who have an enforceable proprietary interest in the property or development which is the subject of the application or whose fee in whole or part is contingent upon the outcome of the application. Identify the name of the individual or entity who made the contribution, the recipient of the contribution, the amount of the contribution and the date of the contribution (*attach additional pages if necessary*):

APPLICATION ZB#: _____

NAME: _____

CONTRIBUTOR	RECIPIENT	AMOUNT	DATE

X _____
signature

2. **CONFLICT DISCLOSURE STATEMENT:** List below any business, financial, social or family relationships between any current member of the Zoning Board of Adjustment and (a) the applicant; (b) any developer involved in the application; (c) all associates (stockholders or individual partners) of said developers who are required to be disclosed pursuant to N.J.S.A. 40:55D-48.1 or 40:55D-48.2; and (d) any professionals who apply for or provide testimony, plans or reports in support of the application or who have an enforceable proprietary interest in the property or development which is the subject of the application or whose fee in whole or part is contingent upon the outcome of the application. Identify the individuals or entities who have such a relationship and the nature of the relationship. (*attach additional pages if necessary*):

APPLICATION ZB#: _____

NAME: _____

INDIVIDUAL/ENTITIES WITH RELATIONSHIP	NATURE OF RELATIONSHIP

X _____
signature

TOWNSHIP OF MARLBORO

AFFIRMATION OF LOCAL PAY TO PLAY ORDINANCE

This form must be completed by all parties seeking a land use approval from the Township which if approved, will result in having to execute a Developer's Agreement, Amended Developer's Agreement or Redevelopment Agreement with the Township of Marlboro.

The undersigned, being authorized and knowledgeable of the circumstances, does hereby certify that _____ (insert name of business entity) has reviewed Chapter 18 of the Code of the Township of Marlboro (revised September, 2007) and certifies that it has not solicited or made, and will not solicit or make, any contributions in violation of the terms of said Chapter.

Chapter 18 of the Code of the Township of Marlboro prohibits developers and/or redevelopers, as defined further in said Chapter, from soliciting or making contributions of money, or pledges of contributions, including in-kind contributions, in excess of certain thresholds specified in said Chapter, within one calendar year immediately preceding the date of entering into a developer's agreement, redevelopment agreement, amended agreement, or contract to:

- Any Township candidate or holder of public office having ultimate responsibility for the award of the contract, or
- Any campaign committee of such candidate or holder of public office, or
- Any Township of Marlboro political party, or
- Any county party committee within the State of New Jersey, or
- Any candidate committee, state or Township political party committee, legislative leadership committee, continuing political committee or political action committee (PAC) organized under Section 572 of the Internal Revenue Code, that is organized for the purpose of promoting or supporting Township candidates or Township officeholders and/or that has within the last calendar year provided financial or in-kind support to Township of Marlboro municipal elections and/or to Township of Marlboro municipal or Township parties.

To review this Chapter and the important definitions and thresholds set forth therein, vendors may view the Township Code by going to the Township's website - www.marlboro-nj.gov.

The undersigned is fully aware that if I have misrepresented in whole or part this affirmation and certification, I and/or the business entity, will be liable for any penalty permitted under law.

Subscribed and sworn before me this ____ day of _____, 2

(Affiant)

My Commission expires:

(Print name & title of affiant) (Corporate Seal)

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name, if different from above	
	Check appropriate box: <input type="checkbox"/> Individual/ Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶	<input type="checkbox"/> Exempt from backup withholding
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number								
			+			+		
or								
Employer identification number								
			+					

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here	Signature of U.S. person ▶	Date ▶

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,